

NON USE CERTIFICATION MONITORING REPORT **LOCAL LIMITS**

APR 21 2009

NAME: Como Textile Prints, Inc.

MAILING ADDRESS: 191 East Railway Avenue

FACILITY LOCATION: Paterson, NJ 07503

CATEGORY & SUBPART ^{local} limits PERMIT #: 27400341

OUTLET #: 1

CONTACT OFFICIAL: Michael Blanchfield 279-2950-1

TELEPHONE #: (973) 279-2950

I have been authorized to certify non-use for the following heavy metals:

Arsenic ☒ Lead ☐ Zinc ☐
 Cadmium ☒ Mercury ☒
 Chromium ☒ Molybdenum ☒
 Copper ☐ Nickel ☐

SAMPLE DATE

MONTH

DAY

YEAR

3

5

09

PARAMETER		CONCENTRATION			SAMPLE TYPE COMP/GRAB
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	
Cd	Sample Measurement	<0.004	NO	mg/l	Comp
	Threshold Value	0.005		mg/l	
Hg	Sample Measurement	<0.0002	NO	mg/l	Comp
	Threshold Value	0.001		mg/l	
Ni	Sample Measurement	<0.01	no	mg/L	comp
	Threshold Value	0.02		mg/L	
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				

- (1) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have met the non-use certification criteria for the following heavy metals:

As <input checked="" type="checkbox"/>	Cr <input checked="" type="checkbox"/>	Pb <input type="checkbox"/>	Mo <input checked="" type="checkbox"/>	Zn <input type="checkbox"/>
Cd <input checked="" type="checkbox"/>	Cu <input type="checkbox"/>	Hg <input checked="" type="checkbox"/>	Ni <input type="checkbox"/>	

Therefore, I am required to monitor for these heavy metals only in March and September.

- (2) (a) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have not yet met the non-use certification criteria for the following heavy metals:

Arsenic <input type="checkbox"/>	Copper <input checked="" type="checkbox"/>	Molybdenum <input type="checkbox"/>
Cadmium <input type="checkbox"/>	Lead <input checked="" type="checkbox"/>	Nickel <input checked="" type="checkbox"/>
Chromium <input type="checkbox"/>	Mercury <input type="checkbox"/>	Zinc <input checked="" type="checkbox"/>

- (b)* Means the number of additional monthly samples needed to reach 3 months in succession when the value is equal to or below the Threshold Value. I understand that I must automatically monitor for the heavy metals identified in (2) (a) above each month until the analytical results for three (3) months in succession are at or below the threshold value for that heavy metal. This will not affect my responsibility to monitor in March and September as required by Section B-103.

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988

4/12/2007
Date


Signature of Principal
Executive or Authorized Agent

Michael Blanchfield

President

Type Name and Title

NON USE CERTIFICATION MONITORING REPORT

LOCAL LIMITS

NAME: Como Textile Prints, Inc.

APR 21 2009

MAILING ADDRESS: 191 East Railway AvenueFACILITY LOCATION: Paterson, NJ 07503CATEGORY & SUBPART local limits PERMIT #: 27400342OUTLET #: 2CONTACT OFFICIAL: Michael BlanchfieldTELEPHONE #: (973) 279-2950

I have been authorized to certify non-use for the following heavy metals:

Arsenic <input checked="" type="checkbox"/>	Lead <input type="checkbox"/>	Zinc <input type="checkbox"/>	SAMPLE DATE			
Cadmium <input checked="" type="checkbox"/>	Mercury <input checked="" type="checkbox"/>		MONTH	DAY	YEAR	
Chromium <input checked="" type="checkbox"/>	Molybdenum <input checked="" type="checkbox"/>		3	5	09	
Copper <input type="checkbox"/>	Nickel <input type="checkbox"/>					

PARAMETER		CONCENTRATION			SAMPLE TYPE
		RESULT	THRESHOLD VALUE EXCEEDED YES OR NO	UNITS	COMP/GRAB
Cd	Sample Measurement	0.004	No	ug/l	Comp
	Threshold Value	0.005		ug/l	
Hg	Sample Measurement	0.0002	No	ug/l	Comp
	Threshold Value	0.0001		ug/l	
Ni	Sample Measurement	0.01	no	mg/L	comp
	Threshold Value	0.02		mg/L	
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				
	Sample Measurement				
	Threshold Value				

- (1) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have met the non-use certification criteria for the following heavy metals:

As ☒ Cr ☒ Pb ☐ Mo ☒ Zn ☐
Cd ☒ Cu ☐ Hg ☒ Ni ☐

APR 21 2009

INDUSTRIAL DEPARTMENT

Therefore, I am required to monitor for these heavy metals only in March and September.

- (2) (a) I have reviewed the analytical data on the reverse side of this form and any applicable prior forms and hereby certify that we have not yet met the non-use certification criteria for the following heavy metals:

Arsenic	<input type="checkbox"/>	<input type="checkbox"/>	Copper	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Molybdenum	<input type="checkbox"/>	<input type="checkbox"/>
Cadmium	<input type="checkbox"/>	<input type="checkbox"/>	Lead	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Nickel	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chromium	<input type="checkbox"/>	<input type="checkbox"/>	Mercury	<input type="checkbox"/>	<input type="checkbox"/>	Zinc	<input checked="" type="checkbox"/>	<input type="checkbox"/>

- (b)* Means the number of additional monthly samples needed to reach 3 months in succession when the value is equal to or below the Threshold Value. I understand that I must automatically monitor for the heavy metals identified in (2) (a) above each month until the analytical results for three (3) months in succession are at or below the threshold value for that heavy metal. This will not affect my responsibility to monitor in March and September as required by Section B-103.

I certify under penalty of law that this document and attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

403.6(a)(2)(ii) revised by 53 FR 40610, October 17, 1988

4/17/2009
Date

Michael Blanchfield
Signature of Principal
Executive or Authorized Agent

Michael Blanchfield

President

Type Name and Title



Passaic Valley Water Commission
P.O. Box 11393
Newark, New Jersey 07101-4393
973-340-4300
877-772-7077

RECEIVED APR 13 2009

Bill Date	Apr 07, 2009
Account Number	122623-98574
Date of Last Payment	Mar 18, 2009
Amount of Last Payment	\$ 510.41
Previous Balance	\$ 0.00
Current Charges	\$ 641.81
Total Amount Due	\$ 641.81
Due Date	May 07, 2009

SERVICE ADDRESS **191 E RAILWAY AVE UT001, PATERSON**

BILL TYPE **MONTHLY BILL**

Billing Period

Feb 09, 2009--Mar 26, 2009

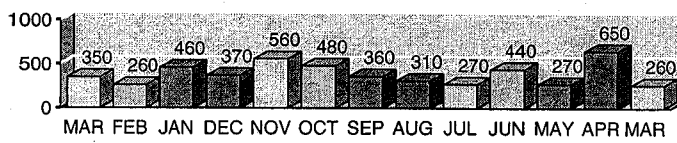
Services

Description	Charge
SERVICE CHARGE	130.81
USAGE CHARGE (CCF)	511.00

Meters

Meter No	Meter Size	Current	Previous	Consumption
60094678	2 INCH	5129	5094	350

Usage History (most recent first)



Message Center

Passaic Valley Water Commission found high levels of lead in drinking water in some homes. Lead can cause serious health problems. For more information please call Passaic Valley Water Commission or visit www.pvwc.com

DETACH HERE AND RETURN LOWER PORTION WITH YOUR CHECK OR MONEY ORDER

COMO TEXTILE PRINTS, INC.
 191 East Railway Avenue
 Paterson, New Jersey 07503
 tel: (973) 279-2950 fax: (973) 881-8450

Date: 4/12/2009

Passaic Valley Sewerage Commissioners
 Industrial Waste Control Department

RE: Computations for monitoring report

Enclosed are the computations for the enclosed monitoring report:

Service #341

Meter #70025607 (CCF) * 748 = gal.

Meter #60094686 100 (CCF) * 748 = 74,800 gal. MR

gal.

5% allowance for evaporation * .95
 =====

Consumption #341 gal.

Service #342

Meter #60094678 350 (CCF) * 748 = 261,800 gal.

5% allowance for evaporation * .95
 =====

Consumption #342 248,710 gal.

Service #343

Meter #45141583 8 (CCF) * 748 = 5,984 gal. MR

=====

Sanitary only #343 5,984 gal.


 Michael Blanchfield
 President

pvs36A

**Technion Inc.,
Testing and Research Laboratories
263 Hillside Avenue
Nutley, NJ 07110**

Tel : 973-661-0800

Fax : 973-661-1817

RECEIVED MAR 23 2009

Analytical Report

Client : Como Textiles
Client Ref :
Material : Four Wastewater Samples

Date : 03/18/09
Technion Ref : 8487
Date Received : 03/05/09
Lab ID : 09: 8487

Project :

Analysis Req : BOD, TSS, pH / Metals (Cd, Cu, Pb, Ni, Hg, Zn)

Analyst : Y. Yildiz, S. Zalewski

The above sample(s) were received on 03/05/09 and analyzed as requested.

Certificate of Analysis

Test Results : Test results are as attached.

Metals Subcontracted to QC Laboratories. NELAP NJ PA166

Release of the data contained in this hard copy data package has been authorized by the laboratory manager as verified by the following signature.


Omar Baturay
Laboratory Manager

OB/td

NJDEP No. 07004

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